PATIENT INFORMATION:

Patient: WRAMC VC-383M

Patient ID:

Study Date: 5/15/2003

Referring Physician: HWANG INKU

INTRODUCTION:

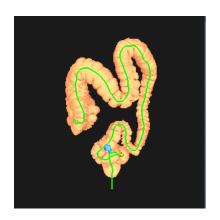
A 60 year old male presents with:

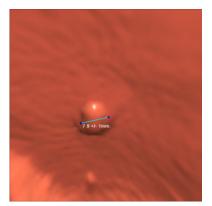
Screening

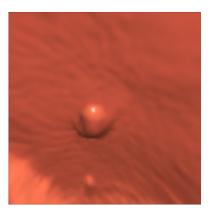
Others: 60 yo WM here for enrollment into Virtual Colonoscopy protocol. Patient states doing well w/o change in BM, wt loss, blood in stool. Patient ave risk for colon cancer w/o FH of colonic polyps, colon ca or polyposis syndromes. Patient w/o positive stool guiac test or h/o iron def anemia w/in past 6 months. Patient has had no prior evaluations for colon cancer screening including normal colonoscopies w/in 10 yrs, and normal ACBE w/in past 5 yrs. Patient w/o h/o adenomatous polyps, colorectal cancer, IBD, HNPCC or FAPS. No h/o rectal bleeding, hematochezia, or unintentional wt loss w/in past 12 months. Patient has no contraindications for colonoscopy in general or to fleets prep.

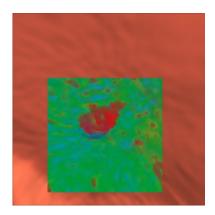
COLON FINDINGS:

(Supine) 7.9 x 0.0 mm round polyp identified in the sigmoid at 16.4 cm from rectum.



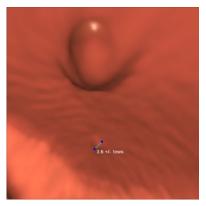






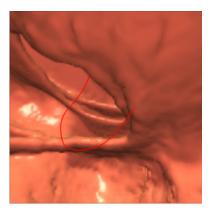
(Supine) 3.6 x 0.0 mm round polyp identified in the sigmoid at 17.2 cm from rectum.

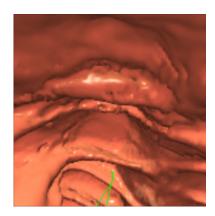




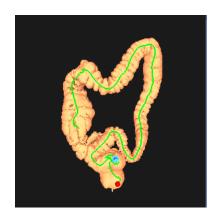
(Supine) Normal finding in the cecum at 146.9 cm from rectum.

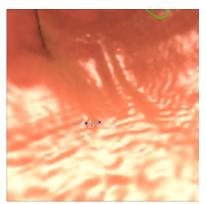


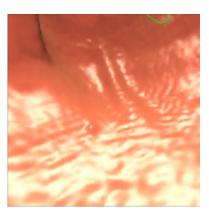


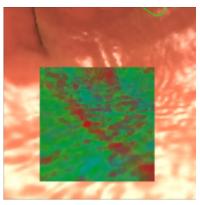


(Prone) $3.8 \times 0.0 \text{ mm}$ round polyp identified in the rectum at 12.9 cm from rectum.









IMPRESSION

- 8 mm sessile polyp in the sigmoid colon. Additional possible sub 5 mm polyps in the sigmoid colon and rectum.

J. Richard Choi, ScD, MD